## PATENT APPLICATION "SE DETERMINATION RECORD

Application of nocker lanitines

10/019705 Effectiv. Jctober 1, 2001

|   |  | CLAIMS AS                                 | Column      |                    | SMALL ENTITY TYPE               |                  | OTHER THAN OR SMALL ENTITY |               |                        |            |            |                        |  |
|---|--|---|-------------|--------------------|---------------------------------|------------------|----------------------------|---------------|------------------------|------------|------------|------------------------|--|
| TO  | TAL CLAIMS   |   |             |                    |                                 |                  |                            | RATE          | FEE                    |            | RATE       | FEE                    |  |
| FOR NUMBE   |  |   |             | ILED               | NUMBE                           | ER EXTRA         |                            | BASIC FEE     | 370.00                 | OR         | BASIC FEE  | <del>7/49</del> -80    |  |
| TOTAL CHARGEABLE CLAIMS 27 minus 2  |  |   |             |                    | • 7                             |                  |                            | X\$ 9=        | 1                      | OR         | X\$18=     | 126                    |  |
| INDEPENDENT CLAIMS 4 minus 3 =  |  |   |             |                    | ' /                             |                  |                            | X42=          |                        | OR         | X84=       | 84                     |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |             |                    |                                 |                  |                            | +140=         |                        |            | +280=      |                        |  |
| * If the difference in column 1 is less than zero, enter                              |  |   |             |                    |                                 | olumn 2          |                            | TOTAL         |                        | OR<br>OR   | TOTAL      | 1100                   |  |
| CLAIMS AS AMENDED - PART II   |  |   |             |                    |                                 |                  |                            | 1             | -112127                |            | OTHER      | THAN                   |  |
|   |  | (Column 1)                                |             |                    | mn 2)<br>IEST                   | (Column 3)       | ١,                         | SMALL         |                        | OR<br>I    | SMALL      | ADDI-                  |  |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |             | NUM<br>PREVI       | IBER<br>OUSLY<br>FOR            | PRESENT<br>EXTRA |                            | RATE          | ADDI-<br>TIONAL<br>FEE |            | RATE       | TIONAL<br>FEE          |  |
|   | Total  | .27                                       | Minus       | #<br>{ }           | 7                               | 7                |                            | X\$ 9=        |                        | OR         | X\$18=     |                        |  |
|   | Independent  | • 4                                       | Minus       | 444                | 4                               | =                |                            | X42=          |                        | OR         | X84=       |                        |  |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |             |                    |                                 |                  |                            | +140=         |                        | OR         | +280=      |                        |  |
| TOTAL   |  |   |             |                    |                                 |                  |                            |               |                        | OR         | TOTAL      |                        |  |
| ADDIT. FEE  5 09 05 (Column 1) (Column 2) (Column 3)                                  |  |   |             |                    |                                 |                  |                            |               |                        |            | ADDIT. FEE |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIG<br>NUM<br>PREV | HEST<br>ABER<br>IOUSLY<br>OFOR  | PRESENT<br>EXTRA |                            | RATE          | ADDI-<br>TIONAL<br>FEE |            | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total-   | 2-7                                       | Minus       | **                 | ਨੂ <b>ੀ</b>                     | • -/-            |                            | X\$ 9=        |                        | OR         | X\$18=-    |                        |  |
|   | Independent  | • 4                                       | Minus .     | ***                | 4                               | - /              |                            | X42=          | -                      | OR         | X84=       | ·                      |  |
|   | FIRST PRESE  | ENTATION OF M                             | IULTIPLE DE | PENDEN             | IT CLAIM                        |                  | L                          | +140=         |                        | OR         | +280=      |                        |  |
| TOTAL<br>ADDIT, FEE   |  |   |             |                    |                                 |                  |                            |               | OR                     | ADDIT. FEE |            |                        |  |
| (Column 1) (Column 2) (Column 3)  |  |   |             |                    |                                 |                  |                            |               |                        |            |            |                        |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | NU:<br>PREV        | HEST<br>MBER<br>MOUSLY<br>D FOR | PRESENT<br>EXTRA |                            | RATE          | ADDI-<br>TIONAL<br>FEE |            | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | •   | Minus       | **                 |                                 | -                | _                          | X\$ 9=        |                        | OR         | X\$18=     |                        |  |
|   | Independent  |   | Minus       | see                | T 01 40                         | -                | 4                          | X42=          |                        | OR         | X84=       |                        |  |
| ᆫ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |             |                    |                                 |                  |                            | +140=         |                        | ÓЯ         |            |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |             |                    |                                 |                  |                            |               |                        |            | TOTA       |                        |  |
| =   | "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |             |                    |                                 |                  |                            |               |                        |            |            |                        |  |
|   | THE THUMBSERE  | IIII TI  |             | - mache            |                                 | o ingress inti   |                            | and at and of |                        | 41 (       |            |                        |  |